

Family Child Care Licensing Inspection Full Report

All licensed child care programs are inspected at least once each year. Non-compliances are documented and grouped as Serious, Moderate or Low risk violations. Documenting statements and supplemental information may be included in this report. Licensing inspection reports from the previous three years can be viewed on the child care website at http://jfs.ohio.gov/CDC/childcare.stm. This includes complaint investigation reports with substantiated allegations. For any other child care records, please contact the Child Care Help Desk at 1-877-302-2347, option 4.

| Program Details | | |
|-----------------|----------------|-------------------|
| Program Name | Program Number | Program Type |
| BOYDEN, RICARLA | 00000968458912 | FCC - Type B Home |
| Address | | County |
| 5452 LEUMA DR | | HAMILTON |
| | | |
| CINCINNATI | | |
| ОН 45239 | | |

| | Inspection Information | | | | |
|--------------------|--------------------------------|------------------|-------------------|--------------|--|
| Inspection Type | Inspection Se | соре | Inspection Notice | | |
| Compliance | Full | | Announced | | |
| Inspection Date | Begin Time | | End Time | | |
| 08/09/2022 | 9:52 AM | | 10:49 AM | | |
| Reviewer: | | | | | |
| Jennifer Herzog | | | | | |
| | Summary of Findings | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk | |
| 68 | 0 | 0 | 0 | 0 | |

| Lic | License Capacity and Enrollment at the Time of Inspection | | | | |
|---------------------------|---|------------|-----------|-------|--|
| Age Group | License Capacity | Enrollment | | | |
| | Totals | Full Time | Part Time | Total | |
| Infant (Birth to < 18 m) | | 1 | 0 | 1 | |
| Young Toddler | | 4 | 0 | 4 | |
| Total Under 2 Years | 3 | 5 | 0 | 5 | |
| Older Toddler | | 1 | 0 | 1 | |
| Preschool | | 2 | 0 | 2 | |
| School Age | | 18 | 0 | 18 | |
| Total Capacity/Enrollment | 6 | 21 | 0 | 26 | |

| Staff-Child Ratios at the Time of Inspection | | | |
|--|--|--------|--|
| Group | Age Group/Range Ratio Observed Comment | | |
| 8/9/2022 | | 1 to 1 | |



Summary of Non-Compliances

If the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited. Ohio Administrative Code 5101: 2-13-03 details the process for submitting a request for a review if a program disagrees with a licensing finding. The request for review must be submitted within seven days from the receipt of the licensing report.

Serious Risk Non-Compliances

No Serious Risk Non-Compliances were observed during this inspection

Moderate Risk Non-Compliances

No Moderate Risk Non-Compliances were observed during this inspection

Low Risk Non-Compliances

No Low Risk Non-Compliances were observed during this inspection



Rules In-Compliance/Not Verified

| Rule | Status | Documenting Statement(s), If applicable |
|-------------------------------------|-----------|---|
| 5101:2-13-02 License Visible | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 Voluntary Temporary | Compliant | |
| Closure | | |
| | | |
| Rule | Status | Documenting Statement(s) If applicable |
| | Compliant | Documenting Statement(s), If applicable |
| 5101:2-13-02 Change of Location | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 Information in OCLQS | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 Provider Medical | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-03 Inspection | Compliant | |
| Requirements | | |
| | | I |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-04 Building Requirements | Compliant | |
| for Type B Homes | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-04 Fire Safety for Type B | Compliant | |
| Homes | | |



| Rule | Status | Documenting Statement(s), If applicable |
|---------------------------------------|------------|---|
| 5101:2-13-04 Flammable and | Compliant | |
| Combustible Materials in a Type B | | |
| Home | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-04 Heaters in a Type B | Compliant | |
| Home | | |
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| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-07 Staff Records | Compliant | |
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| | | |
| Dula | Status | Documenting Statement(s) If smilles his |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-07 Type B Provider - Foster | Compliant | |
| Parent | | |
| L | | I |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-08 Employee Requirements | Compliant | |
| 5101.2-15-08 Employee Requirements | Compliant | |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-08 Child Care Staff | Compliant | |
| Requirements | compilatio | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-08 Whistle Blower | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-09 Background Checks | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-10 Health Training | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-10 Professional | Compliant | |
| Development | | |
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| 5101:2-13-11 Outdoor Space Compliant Rule Status Documenting Statement(s), if applicable S101:2-13-11 Outdoor Equipment Compliant Documenting Statement(s), if applicable Rule Status Documenting Statement(s), if applicable S101:2-13-11 Fall Zone Compliant Documenting Statement(s), if applicable Rule Status Documenting Statement(s), if applicable S101:2-13-12 Safe Equipment Compliant Documenting Statement(s), if applicable S101:2-13-12 Safe Environment Compliant Documenting Statement(s), if applicable S101:2-13-13 Clean environment and equipment Status Documenting Statement(s), if applicable S101:2-13-13 Clean environment and equipment Compliant Documenting Statement(s), if applicable S101:2-13-13 Handwashing Compliant Documenting Statement(s), if applicable S101:2-13-13 Handwashing Compliant Documenting Statement(s), if applicable S101:2-13-13 Toothbrushing Compliant Documenting Statement(s), if applicable S101:2-13-13 Toothbrushing Compliant Documenting Statement(s), if applicable S101:2-13-14 Requirements for Field and Routine Trips Status Documenting Statement(s), if applicable | Rule | Status | Documenting Statement(s), If applicable |
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| | 5101:2-13-14 Requirements for Field | Compliant | |
| Rule Status Documenting Statement(s), If applicable | and Routine Trips | | |
| Rule Status Documenting Statement(s), If applicable | | | |
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| | Kule | Status | Documenting Statement(s), If applicable |



| 5101:2-13-14 Ratio and Supervision for Field and Routine Trips | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Driver Requirements | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Vehicle Inspections | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s) If applicable |
| 5101:2-13-14 Vehicle Requirements | Compliant | Documenting Statement(s), If applicable |
| | compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-15 Child Medical and | Compliant | |
| Enrollment Records | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-15 Health Conditions | Compliant | |
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| Rule 5101:2-13-15 Child Records Retention | Status | Documenting Statement(s), If applicable |
| and Confidentiality | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Medical, Dental, and | Compliant | becamenting statement(s), in applicable |
| General Emergency Plan | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Emergency Drills | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 First Aid Kit/Standard | Compliant | |
| Precautions | | |
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| Rule | Status Compliant | Documenting Statement(s), If applicable |
| 5101:2-13-16 Communicable Diseases | Compliant | |



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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Incident/Injury | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Disaster Plan | Compliant | bocumenting statement(s), it applicable |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-18 Attendance | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-19 Supervision | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-19 School Age Supervision | Compliant | |
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| Rule | Ctatus | Decumenting Statement(s) If englishing |
| 5101:2-13-19 Child Guidance | Status Compliant | Documenting Statement(s), If applicable |
| | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-20 Sleep and Nap | Compliant | |
| Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-20 Crib and Playpen | Compliant | |
| Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-21 Evening and Overnight | Compliant | |
| Care | | |
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| Dula | Ctatus | Desumanting Statemart(s) If any list be |
| Rule 5101:2-13-21 Sanitary Environment | Status Compliant | Documenting Statement(s), If applicable |
| and Hygiene | | |
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| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-22 Meals and Snacks | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-22 Fluid Milk | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-22 Food Handling | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-23 Infant Daily Care | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-23 Infant Bottle and Food | Compliant | |
| Preparation | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-23 Diapering | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-24 Parent Permission for | Compliant | |
| Swimming | p | |
| Switting . | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-25 Medication | Compliant | |
| Requirements | | |
| Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-07 Provider Responsibilities | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-18 Group Size and Ratios | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13 Written Policies and | Compliant | |
| Procedures | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-12 Carbon Monoxide | Compliant | |
| Detectors - Type B Only | | |
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| Rule | Status | Descriptions Statement(s) If emplicable |
| | | Documenting Statement(s), If applicable |
| 5101:2-13-11 Indoor Space | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-17 Programming | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-24 On-site Pools | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-12 Pets | Compliant | |
| 5101.2 15 12 1 013 | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-24 Swimming Sites | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-17 Materials and | Compliant | |
| Equipment | | |
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